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**Combined Declaration** 

Our Reference: FKC-100-A

## **COMBINED DECLARATION AND POWER OF ATTORNEY**

## **DECLARATION:**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## WRENCH FOR HOLDING A BLOT OF A BOLTED CONNECTION DURING TIGHTENING OR LOOSENING

•	n of which (check only on attached hereto.	,			
		on analization Corial No.			
[] W		es application Serial No (if applicable).	on	, and	was amended
[x] wa		ional application Number <u>PCT/G</u> CT Article 19 on(if a	<b>B2003/003060</b> oplicable).	on 15 July	<u>, 2003</u> , and was
including the clinical lacks Code of Federa I here foreign applicated at leading the common series of the common s	aims, as amended by a nowledge the duty to di all Regulations, §1.56. aby claim foreign priorit cion(s) for patent or inve- east one country other to box, any foreign applicate before that of the a	viewed and understand the conterny amendment referred to above. sclose information which is materically benefits under Title 35, United Sentor's certificate or §365(a) of any than the United States of Americal cation for patent or inventor's certipplication on which priority is clair	al to patentability tates Code, §119 PCT international listed below and ficate, or PCT intended:	as defined (a)-(d) or § al application have also	in Title 37, 365(b) of any on(s) which identified below.
Prior Foreign/PCT Application(s) and a		ny Priority Claims Under 35 U.S.C. §119:		Priority Claimed	
0216902.7 (Number)	GB (Country)	19 July 2002 (Day/Mo/Yr Filed)		[X ] Yes	[ ]
(Number)	(Country)	(Day/Mo/11 Filed)		res	No
(Number)	(Country)	(Day/Mo/Yr Filed)	[ ]	[ ] Yes	No
l herebelow.		der 35 U.S.C. §119(e) of any Unit	ed States provisi	onal applic	ation(s) listed
(Application Nu	imber)	(Filing Date)			
(Application Number)		(Filing Date)	·		_
§365(c) of any as the subject r international ap acknowledge th Federal Regula	PCT international appli matter of each of the cla plication(s) in the mani ne duty to disclose infor	der Title 35, United States Code, cation(s) designating the United S aims of this application is not discluder provided by the first paragraph mation which is material to patent ame available between the filing dapplication.	tates of America, osed in the prior of Title 35, Unite ability as defined	listed below United Stated States Countries in Title 37.	w and, insofar es or PCT ode, §112, I Code of
Prior U. S. App	lication(s) or PCT Inter	national Application(s) Designating	the U.S. for Ber	efit Under	35 U.S.C. §120:
PCT/GB2003/0	03060	15 July 2003	F	Pendina	
(Application Number)		(Filing Date)		(Status: patented, pending, abandoned	
(Application Nu	imber)	(Filing Date)	(Status: pate	ented, pend	ing, abandoned)

## **POWER OF ATTORNEY:**

I hereby appoint the following attorney(s) and/or agent(s) Julia Church Dierker, Patent Office Registration No. 33368 as my attorney(s) and/or agent(s), to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith.

I hereby declare that all statements made herein of my own knowledge are true and that all statements

made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the

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Phone: (248) 649-9900

CUSTOMER NO .: 29296

application or any patent issued thereon. 1-00 Full name of sole or first inventor Allister Stewart Residence "East Ingle", 20 East Shore Lane, Bermuda SOMERSET, BERMUDA Post Office Address "East-Ingle", 20 East Shore Lane, Bermuda P.O. BOX 109 MANGROVE B SOMERSET BERMUDA Full name of second joint inventor, if any \_\_\_\_. Inventor's Signature\_\_\_\_ \_\_\_\_\_Citizenship \_\_\_\_\_ Date\_ Residence\_ Post Office Address \_\_\_ Full name of third joint inventor, if any\_\_\_ Inventor's Signature \_\_\_\_\_ Citizenship \_\_\_\_\_ Residence\_ Post Office Address \_\_\_\_ Full name of fourth joint inventor, if any \_\_\_\_\_Citizenship \_\_\_\_\_ Residence\_\_

Post Office Address \_\_\_\_\_